

Maladaptive daydreaming: a narrative review

Abstract

Several characteristics have been associated with maladaptive daydreaming including experiential avoidance, perfectionism, lack of self-compassion, psychological distress, loneliness, psychotic experiences, heavy drinking, and suicidality. The prevalence of maladaptive daydreaming has ranged from a low of 2.5% to a high of 70%. It is not clear whether this significant variability relates to cross-cultural differences or differences in the definitions and measures of maladaptive daydreaming. Surprisingly, only three studies were found in this literature on the negative effects of maladaptive daydreaming including problematic social media use, videogaming, as well as multiple diagnoses and psychological problems associated with maladaptive daydreaming. Several comorbidities of maladaptive dreaming were noted including depression, anxiety, obsessive compulsive disorder (OCD), attention deficit hyperactivity disorder (ADHD), dissociative identity disorder (DID), borderline personality disorder (BPD), and autism (AD). Several risks for maladaptive daydreaming have included childhood trauma, anxious and insecure attachments, low self-concept, narcissism, loneliness, and social media addiction. Resting state functional connectivity was the only mechanism study that suggested that maladaptive daydreaming was located in the default mode network, the central executive network, the salience network and the attention network. This was also the only study that related adaptive daydreaming to creativity. Mindfulness meditation was the only intervention study found in this current literature on maladaptive daydreaming. Several methodological limitations can be noted for this literature including the lack of studies on daydreaming itself, the almost exclusive appearance of studies from eastern countries, its negative effects being limited to three studies, the several studies focused on confounding comorbidities and the lack of potential underlying biological mechanism and intervention studies.

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Introduction

Maladaptive daydreaming: a narrative review

Daydreaming has been defined as recalling past events and fantasizing thoughts in situations involving another task. It has been distinguished from mind-wandering which has been defined as planning, worrying and ruminating in situations where there is no other task.¹ The research for this narrative review involved entering the term daydreaming and the years 2020 to 2026 in PubMed and PsycINFO. Exclusion criteria included case studies and non-English language papers. Virtually every title that was cited by these two search engines was on maladaptive daydreaming versus daydreaming itself. This narrative review includes 26 papers on the prevalence of maladaptive daydreaming (6 papers), comorbidities of maladaptive daydreaming (7 papers), negative effects (3), risk factors (8), a potential underlying biological mechanism (1) and an intervention (1). These sections are followed by a discussion on methodological limitations of this current literature.

Although most of the studies in this literature were based on the Maladaptive Daydreaming Scale, the Addictive Daydreaming Scale was also used in some of them. Several characteristics have been associated with maladaptive daydreaming. In a study entitled "Experiential avoidance, perfectionism and self-compassion in maladaptive versus adaptive daydreaming: a comparative study in Iran", the results are given in the title.² Based on the Maladaptive Daydreaming Scale given to the Iranian sample (N=428), experiential avoidance, perfectionism and lack of self-compassion were the characteristics that distinguished maladaptive from adaptive daydreaming. That these groups differed on these characteristics was not surprising given that the maladaptive group had high scores on the Maladaptive Daydreaming Scale that includes avoidance, perfectionism and self-compassion items.

In other research, maladaptive and immersive daydreaming were compared.³ In this study, the maladaptive group (N= 20) versus the immersive daydreaming group (N=17), not surprisingly, had higher scores on the Maladaptive Daydreaming Scale. The higher scores for the maladaptive group occurred especially on functional impairment, loss of control and emotional distress items. These findings were not surprising given that while both types of daydreaming feature vivid fantasies, maladaptive daydreaming is compulsive and it involves lack of control and functional impairment while immersive daydreaming is voluntary and is frequently creative and complementary to real life.

A shorter five – item measure of maladaptive daydreaming was administered to a large sample (N= 2512).⁴ Maladaptive daydreaming was associated with psychological distress, loneliness, psychotic experiences, heavy drinking, and suicidality. These maladaptive daytime experiences might be expected to contribute to maladaptive daydreaming, and they are also associated with several risk factors and comorbidities experienced by maladaptive daydreamers.

Prevalence of maladaptive daydreaming

The prevalence of maladaptive daydreaming has ranged widely from a low of 2.5% to a high of 70%. It is not clear whether this significant variability relates to cross-cultural differences on maladaptive daydreaming, differences in the definitions of maladaptive daydreaming and/or different measures of maladaptive daydreaming (Table 1).

The lowest prevalence (**2.5%**) was based on the Maladaptive Daydreaming Scale that was administered to a sample from Iran.⁵ A slightly greater incidence of 4.2% was reported for a general Jewish –Israeli sample that was also given the Maladaptive Daydreaming Scale.⁶

Table 1 Prevalence of maladaptive daydreaming (and first authors)

Prevalence	First authors
2.5% Iranian sample	Pourmoazzen
4.2% Jewish-Israeli sample	Soffer- Dudek
13% adolescents with psychopathology	Conte
18% Vietnamese adults	Dao
20% adult sample with ADHD	Theodor-Katz
70% Saudi Arabian medical students	Alenzi

Significantly greater prevalence (**13%**) was noted for a sample of adolescents with psychopathology who completed the Daydreaming Frequency Scale.⁷ Both the stress of adolescence and the psychopathology of the adolescents likely contributed to this greater prevalence. A slightly greater prevalence (**18%**) was given for a Vietnamese adolescent sample which might have experienced both the stress of adolescence and living in Vietnam.⁸ A similar prevalence (**20%**) was reported in a study on adults with attention deficit hyperactivity disorder (ADHD) whose maladaptive daydreaming was likely related to their ADHD.⁹ The sample with the greatest prevalence (**70%**) was comprised of medical students from Saudi Arabia who were probably stressed and sleep deprived as medical students.¹⁰

Negative effects of maladaptive daydreaming

Surprisingly, only a few studies were found in this literature on the negative effects of maladaptive daydreaming. The negative effects included problematic social media use, videogaming, multiple diagnoses, and psychological problems associated with maladaptive daydreaming (Table 2).

Table 2 Negative effects of maladaptive daydreaming (and first authors)

Negative effects	First authors
Problematic social media use	Pezzi
Video gaming addiction	Zaheer
Problematic internet use	Somer

In a study entitled “Maladaptive daydreaming and problematic online behaviors: a network analysis approach”, maladaptive daydreaming was associated with **problematic social media use** (N= 1209).¹¹ Maladaptive daydreaming in this sample was also associated with **cyberchondria** (habitual searching for medical information online). In a similar study, maladaptive daydreaming contributed to **video gaming addiction** in adolescents (N=898 Italian adolescents).¹² Maladaptive daydreaming was also associated with **problematic internet use** in a meta-analysis of 40 studies (N=24,977).¹³

Comorbidities of maladaptive daydreaming

Several comorbidities of maladaptive daydreaming have been noted in this current literature. They include depression, anxiety, obsessive compulsive disorder (OCD), attention deficit hyperactivity disorder (ADHD), dissociative identity disorder (DID), borderline personality disorder (BPD), and autism (AD) (Table 3).

Table 3 Comorbidities of maladaptive daydreaming (and first authors)

Comorbidities	First authors
Depressive disorder	Psykowska, Theodor-Katz
Borderline personality disorder	Psykowska
Generalized anxiety disorder	Alenzi
Obsessive compulsive disorder	Solomon-Small
Dissociative identity disorder	Soffer-Dudek
Attention deficit hyperactivity disorder	Theodor-Katz
Multiple psychopathologies	Somer, Conte

Depressive disorder has been associated with maladaptive daydreaming and emotional dysregulation in research that compared a depressed group with a borderline personality disorder group.¹⁴ In the depressed group (N= 86), maladaptive daydreaming was associated with self-suppression, escapism and social withdrawal. In the borderline personality disorder group (N= 100), maladaptive daydreaming was also linked with self-suppression and escapism but also with negative affect. Surprisingly, negative affect was linked to borderline personality disorder rather than depression. Depression was also related to maladaptive daydreaming in a study on adults with ADHD.⁹

Generalized anxiety disorder has also been comorbid with maladaptive daydreaming. In a study entitled “Impact of maladaptive daydreaming on grade point average and the association between maladaptive daydreaming and generalized anxiety disorder”, the sample was comprised of Saudi medical students.¹⁰ This sample had a prevalence of 80% generalized anxiety disorder and a prevalence of 70% maladaptive day-dreaming. The sample also had a low GPA, which was likely related to both the high prevalence of maladaptive daydreaming and generalized anxiety disorder.

Obsessive compulsive disorder has also been associated with maladaptive daydreaming. In a study on individuals who self-identified as having maladaptive daydreaming (N= 510), obsessive and compulsive symptoms were prevalent.¹⁵ The symptoms included checking and repetitious compulsions and intrusive obsessions and body-related obsessions and compulsions.

Maladaptive daydreaming has also been noted for patients with **dissociative identity disorder** (N= 67 patients).¹⁶ In this sample, as many as 40% had maladaptive daydreaming.

Attention deficit hyperactivity disorder has also been associated with maladaptive daydreaming. In a study entitled “Could immersive daydreaming underlie a deficit in attention?“, 20% of the adults with attention deficit hyperactivity disorder were noted to have maladaptive daydreaming (N= 83).⁹ This group also had high levels of depression and loneliness as well as low self-esteem.

Maladaptive daydreaming has been associated with **multiple psychopathologies** in at least 40 studies based on a recent systematic review and meta- analysis.¹³ This very large sample (N= 24,977) had a mean age of 29. Maladaptive daydreaming was associated with several comorbidities including depression, anxiety, dissociative identity disorder, OCD, ADHD, psychotic symptoms, and autism. Other problems included traumatic experiences, emotional dysregulation, loneliness, dysfunctional personality traits, negative affect, pathological celebrity worship, shame, somatic symptoms, problematic internet use and psychological distress. It was also negatively associated with self-efficacy and self-esteem. The authors suggested that maladaptive daydreaming behaviors were like those of other DSM disorders by showing comorbidity with various psychopathologies.

Multiple psychopathologies have also been associated with maladaptive daydreaming in adolescents based on the Daydreaming Frequency Scale.⁷ In this sample (N= 251), the prevalence of maladaptive daydreaming was 13%, which was present in those with internalizing symptoms, depression, OCD, and PTSD.

Risks for maladaptive daydreaming

Several risks for maladaptive daydreaming have been the focus of research in this current literature. They include childhood trauma,

anxious and insecure attachments, low self-concept, narcissism, loneliness, and social media addiction (Table 4).

Table 4 Risks for maladaptive daydreaming (and first authors)

Risks	First authors
Childhood trauma	Karaagac
Anxious attachment	Pourmoazzen
Insecure attachment	Costanzo
Attachment problems	Zaheer
Low self-concept	Meidan
Narcissism	Renci, Eren
Loneliness	Gao
ADHD and autism traits	Eren

Maladaptive daydreaming has been conceptualized as an immersive, compulsive form of fantasy engagement often linked to emotional avoidance related to childhood trauma. In a study on medical students (N=366), **childhood trauma** contributed to maladaptive daydreaming.¹⁷ Cognitive fusion (becoming so entangled with your thoughts that you treat them as literal truths) and distress were serial mediators of the relationship between trauma and maladaptive daydreaming. Having stress and sleep deprivation as a medical student, as already noted, may have also contributed to maladaptive daydreaming. The inherent problems of being a member of high-risk groups like adolescents and medical students are often not included as risk factors in data analyses on these convenience samples.

Relatedly, attachment styles have been linked to maladaptive daydreaming. In a study entitled “The impact of attachment styles and traumatic experiences on maladaptive daydreaming among Iranian population”, the Maladaptive Daydreaming Scale was administered to adults (N=400).⁵ In this sample, **anxious attachment** contributed to maladaptive daydreaming. That relationship was mediated by emotional dysregulation. These findings were not surprising as both anxious attachment and emotional dysregulation have contributed to many maladaptive experiences. Living in a dictatorship like Iran may have also contributed to these maladaptive experiences.

In a paper entitled “Attached to virtual dreams: the mediating role of maladaptive daydreaming in the relationship between attachment styles and problematic social media use”, the results are in the title.¹⁸ In this sample (N= 877), **insecure attachment** (closely related to anxious attachment) led to maladaptive daydreaming, which in turn led to problematic social media use.

In a similar study entitled “Parent attachment and video gaming addiction: the serial mediation role of social support and maladaptive daydreaming”, the results are also in the title.¹² In this sample, Italian adolescents with **attachment problems** (N=898) experienced maladaptive daydreaming and low social support which in turn led to their video gaming addiction.

Low self-concept has also been a risk factor for maladaptive daydreaming. In a sample of adults (N=191, mean age=29), low self-concept led to memory deficits which in turn led to maladaptive daydreaming.¹⁹ These participants experienced less autobiographical memory and more confabulation (fabricating imaginary experiences).

In research entitled “What is a relationship between narcissism and maladaptive daydreaming? The role of defense mechanisms as mediators”, **narcissism** was a risk factor for maladaptive daydreaming.²⁰ In this sample (N=562, mean age =27), immature and neurotic traits mediated the relationship between narcissism and maladaptive daydreaming. Narcissism was also one of the multiple

risk factors for maladaptive daydreaming in a sample of university students in Turkey (N= 848, mean age =21).²¹

Loneliness has also been a risk factor for maladaptive daydreaming. In a study entitled “Loneliness as a motivating factor for maladaptive daydreaming among Vietnamese adolescents: the role of online novel reading”, loneliness led to maladaptive daydreaming.⁸ In this sample of 388 surveys, loneliness led to maladaptive daydreaming with online novel reading as a mediator.

In a paper entitled “A multidimensional model of maladaptive daydreaming”, multiple factors were noted for maladaptive daydreaming.²¹ In this sample of university students from Turkey (N= 848, mean age =21), **ADHD symptoms and autism traits** were the strongest predictors. Other risk factors also contributed to the variance in maladaptive daydreaming, including anxiety, social media addiction, and narcissism traits.

Potential underlying biological mechanism

Only one research study was focused on a potential underlying biological mechanism in this literature entitled “The bright side and the dark side of daydreaming predict creativity together through brain functional connectivity”, positive constructive daydreaming was positively related to creativity while poor attention control was negatively related.²² Resting state functional connectivity was located in the default mode network, the central executive network, the salience network and the attention network. This was virtually the only mechanism study and the only study that concluded that daydreaming was closely related to creativity.

Intervention for maladaptive daydreaming

Mindfulness meditation was the only intervention study found in this current literature on maladaptive daydreaming. In this study (N= 114), mindfulness meditation was practiced plus psychoeducation and motivation enhancement.²³ A 24% improvement rate was noted for reducing the frequency of maladaptive daydreaming symptoms and increasing functioning. The study, however, was confounded by the combination of different therapy protocols.

Methodological limitations of this literature

In a scoping review entitled “What is known about maladaptive daydreaming”, 89 studies were included.²⁴ Although the studies consistently showed negative effects of maladaptive daydreaming, several methodological problems were noted. They included the almost exclusively used cross-sectional study design, the younger female samples, the associated psychological correlates and the comorbidity with mental disorders.

Several other methodological limitations can be noted for this literature. These include the lack of studies on daydreaming itself, the almost exclusive appearance of studies from eastern countries, its negative effects being limited to three studies, the several studies focused on confounding comorbidities and the lack of potential underlying biological mechanism and intervention studies.

Only one study was found on a comparison between adaptive and maladaptive daydreaming. The entire literature is focused on maladaptive daydreaming. It's not clear how this research moved from daydreaming being associated with creativity to the almost exclusive research on maladaptive daydreaming. Most of the studies were conducted in eastern countries which are currently considered stressful, including Iran and Israel, which may have contributed to the research being focused on maladaptive daydreaming.

Even though the literature is called maladaptive daydreaming, only three studies were focused on negative effects of maladaptive daydreaming, and those negative effects were almost exclusively related to problematic social media use. Only three studies focused on risks and those risks were related to childhood trauma and attachment problems. The risks were likely confounded by the comorbidities which occurred in many studies. The comorbidities were severe disorders that might have contributed more than the risk factors for maladaptive daydreaming. Data analyses that would determine the relative significance of risks/comorbidities, for example, stepwise regressions and structural equation modeling, were not conducted.

Only one study assessed a potential underlying biological mechanism and only one research group assessed an intervention. Despite these limitations, the literature on maladaptive daydreaming will likely inform future research. For future directions, longitudinal studies are needed as are randomized controlled trials and neurobiological studies.²⁵

Conclusion

The current literature on maladaptive daydreaming has focused on experiential avoidance, perfectionism, lack of self-compassion, psychological distress, loneliness, psychotic experiences, heavy drinking, and suicidality.

Maladaptive daydreaming has varied across studies from a low of 2.5% to a high of 70%. This variability may relate to cross-cultural differences or different definitions and measures of maladaptive daydreaming. Only three studies were focused on the negative effects of maladaptive daydreaming including problematic social media use, videogaming, as well as multiple diagnoses and psychological problems that were comorbid with maladaptive daydreaming. These comorbidities included depression, anxiety, obsessive compulsive disorder (OCD), attention deficit hyperactivity disorder (ADHD), dissociative identity disorder (DID), borderline personality disorder (BPD), and autism (AD). Several risk factors were also noted including childhood trauma, anxious and insecure attachments, low self-concept, narcissism, loneliness, and social media addiction. The only mechanism study suggested that maladaptive daydreaming activated the default mode network, the central executive network, the salience network and the attention network. Mindfulness meditation was the only intervention study in this literature. Other methodological limitations included the lack of studies on daydreaming itself, the almost exclusive appearance of studies from eastern countries, the negative effects being limited to three studies, the several studies focused on confounding comorbidities and the lack of potential underlying biological mechanism and intervention studies. Future research is needed on positive effects of daydreaming, on potential underlying biological mechanisms and on interventions to reduce maladaptive daydreaming.

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Conflicts of interest

The author declares there is no conflicts of interest.

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